

Procedure Code	Full Description	Allowable or Required Modifiers	Rental Days Before PA / Max Fee	Purchase PA Needed / Max Fee	Life Expectancy	In NH Facility Rate?	Allowable Provider Types	Effective Date	Allowable Place of Service
A4210	NEEDLE-FREE INJECTION DEVICE, EACH		No Rental	Y / \$492.57	3 YEARS	In Rate	05, 24, 25, 53	20080701	01, 05, 06, 07, 08, 11, 12, 13, 14, 20, 26, 34, 49, 50, 57, 60, 71, 72
E0747	OSTEOGENESIS STIMULATOR, ELECTRICAL, NONINVASIVE, OTHER THAN SPINAL APPLICATIONS		No Rental	Y / \$2,408.48	2 YEARS	Not In Rate	05, 24, 25, 53	20080701	01, 05, 06, 07, 08, 11, 12, 13, 14, 31, 32, 33, 49, 50, 54, 71, 72
E0748	OSTEOGENESIS STIMULATOR, ELECTRICAL, NONINVASIVE, SPINAL APPLICATIONS		No Rental	Y / \$3,025.70	2 YEARS	Not In Rate	25	20080701	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 33, 49, 50, 71, 72
E0760	OSTEOGENESIS STIMULATOR, LOW INTENSITY ULTRASOUND, NONINVASIVE		No Rental	Y / \$2,552.49	5 YEARS	Not In Rate	25	20080701	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 33, 49, 50, 71, 72
E0782	INFUSION PUMP, IMPLANTABLE, NONPROGRAMMABLE (INCLUDES ALL COMPONENTS, E.G., PUMP, CATHETER, CONNECTORS, ETC.)	RR	0 / \$10.71	No Purchase	5 YEARS	Not In Rate	05, 24, 25, 53	20080701	01, 05, 06, 07, 08, 11, 12, 13, 14, 31, 32, 33, 49, 50, 54, 71, 72
K0606	AUTOMATIC EXTERNAL DEFIBRILLATOR, WITH INTEGRATED ELECTROCARDIOGRAM ANALYSIS, GARMENT TYPE	RR	0 / \$61.91	No Purchase	N/A	In Rate	25, 31/312	20090101	12
L0810	HALO PROCEDURE; CERVICAL HALO INCORPORATED INTO JACKET VEST		No Rental	N / \$1,997.14	3 YEARS	Not In Rate	04, 05, 17, 24, 25, 53, 77, 78	20080701	21, 22, 23
L0820	HALO PROCEDURE; CERVICAL HALO INCORPORATED INTO PLASTER BODY JACKET		No Rental	N / \$970.09	3 YEARS	Not In Rate	04, 05, 17, 24, 25, 53, 77, 78	20080701	21, 22, 23
L0830	HALO PROCEDURE; CERVICAL HALO INCORPORATED INTO MILWAUKEE TYPE ORTHOSIS		No Rental	N / \$1,091.35	3 YEARS	Not In Rate	04, 05, 17, 24, 25, 53, 77, 78	20080701	21, 22, 23
L0859	ADDITION TO HALO PROCEDURE, MAGNETIC RESONANCE IMAGE COMPATIBLE SYSTEMS, RINGS AND PINS, ANY MATERIAL		No Rental	N / \$1,002.35	3 YEARS	Not In Rate	09, 10, 31, 33	200120901	21, 22, 23
L7510	REPAIR OF PROSTHETIC DEVICE, REPAIR OR REPLACE MINOR PARTS		No Rental	Y / Only If Over \$150	Varies	Not In Rate	20, 24, 25, 53, 74	20080701	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8500	ARTIFICIAL LARYNX, ANY TYPE		No Rental	N / \$536.12	None	Not In Rate	04, 05, 17, 24, 25, 53, 74, 79	20080701	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 31, 32, 33, 49, 50, 54, 71, 72
L8501	TRACHEOSTOMY SPEAKING VAVLE		No Rental	N / \$84.84	None	Not In Rate	04, 05, 17, 24, 25, 53, 74, 79	20080701	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 31, 32, 33, 49, 50, 54, 71, 72
L8510	VOICE AMPLIFIER	RR	0 / Priced on PA	Y / Priced on PA	None	Not In Rate	04, 05, 17, 24, 25, 53, 74, 79		01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 31, 32, 33, 49, 50, 54, 71, 72
L8610	OCULAR IMPLANT		No Rental	N / Priced on Claim	None	Not In Rate	05, 24, 25, 53	20080701	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 31, 32, 33, 49, 50, 54, 71, 72
L8612	AQUEOUS SHUNT		No Rental	N / Priced on Claim	None	Not In Rate	05, 24, 25, 53	20080701	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 31, 32, 33, 49, 50, 54, 71, 72
L8613	OSSICULA IMPLANT		No Rental	N / Priced on Claim	None	Not In Rate	05, 24, 25, 53	20080701	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 31, 32, 33, 49, 50, 54, 71, 72
L8614	COCHLEAR DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS		No Rental	N / \$17,262.95 Must be billed with implantation	Not Applicable	Not In Rate	25	20120901	22, 23, 24
L8615	HEADSET/HEADPIECE FOR USE WITH COCLEAR IMPLANT DEVICE, REPLACMENT		No Rental	N / \$360.00	3 Years	Not In Rate	20, 24, 25, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72

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L8616	MICROPHONE FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT		No Rental	N / \$240.00	1 Year	Not In Rate	20, 24, 25, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8617	TRANSMITTING COIL FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT		No Rental	N / \$77.19	4 Per 6 Months	Not In Rate	20, 24, 25, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8618	TRANSMITTER CABLE FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT		No Rental	N / \$22.06	4 Per 6 Months	Not In Rate	20, 24, 25, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8619	COCHLEAR IMPLANT, EXTERNAL SPEECH PROCESSOR AND CONTROLLER, INTEGRATED SYSTEM, REPLACEMENT		No Rental	N / \$6,000.00	3 YEARS	Not In Rate	20, 25, 31, 33, 74	20110501	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8621	ZINC AIR BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT, EACH		No Rental	N / \$1.02	33 Per Month	Not In Rate	20, 25, 31, 33, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8622	ALAKALINE BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICE, ANY SIZE, REPLACMENT, EACH		No Rental	N / \$1.02	33 Per Month	Not In Rate	20, 25, 31, 33, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8623	LITHIUM ION BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICESPEECH PROCESSOR, OTHER THAN EAR LEVEL, REPLACEMENT		No Rental	N / \$53.00	2 Per Year	Not In Rate	05, 20, 24, 25, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8624	LITHIUM ION BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICE SPEECH PROCESSOR, EAR LEVEL, REPLACEMENT		No Rental	N / \$122.00	2 Per Year	Not In Rate	05, 20, 24, 25, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8627	COCHLEAR IMPLANT, EXTERNAL SPEECH PROCESSOR, COMPONENT, REPLACEMENT		No Rental	N / Priced on Claim	3 YEARS	Not In Rate	20, 25, 31, 33, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8628	COCHLEAR IMPLANT, EXTERNAL CONTROLLER COMPONENT, REPLACEMENT		No Rental	N / Priced on Claim	3 YEARS	Not In Rate	20, 25, 31, 33, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8629	TRANSMITTING COIL AND CABLE, INTEGRATED FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT		No Rental	N / \$99.25	4 Per 6 Months	Not In Rate	20, 24, 25, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8680	IMPLANTABLE NEUROSTIMULATOR ELECTRODE, EACH		No Rental	N / \$350.23	Up To 16 Per Surgery	Not In Rate	25	20120901	22, 23, 24
L8685	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, SINGLE ARRAY, RECHARGEABLE, INCLUDES EXTENSION		No Rental	N / \$11,999.00	10 YEARS	Not In Rate	25	20080701	22, 23, 24
L8686	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, SINGLE ARRAY, NONRECHARGEABLE, INCLUDES EXTENSION		No Rental	N / \$7,554.69	10 YEARS	Not In Rate	25	20120901	22, 23, 24
L8687	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, DUAL ARRAY, RECHARGEABLE, INCLUDES EXTENSION		No Rental	N / \$11,999.00	10 YEARS	Not In Rate	25	20080701	22, 23, 24
L8688	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, DUAL ARRAY, NONRECHARGEABLE, INCLUDES EXTENSION		No Rental	N / \$9,831.68	10 YEARS	Not In Rate	25	20120901	22, 23, 24
L8690	AUDITORY OSSEOINTEGRATED DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS		No Rental	Y / \$4,742.00	5 YEARS	Not In Rate	25	20080701	22, 23, 24
L8691	AUDITORY OSSEOINTEGRATED DEVICE, EXTERNAL SOUND PROCESSOR, REPLACEMENT		No Rental	N / \$2,173.52	5 YEARS	Not In Rate	20, 25, 31, 33, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72

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L8692	AUDITORY OSSEOINTEGRATED DEVICE, EXTERNAL SOUND PROCESSOR, USED WITHOUT OSSEOINTEGRATION, BODY WORN, INCLUDES HEADBAND OR OTHER MEANS OF EXTERNAL ATTACHMENT		No Rental	Y / Priced on PA	5 YEARS	Not In Rate	25	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8693	AUDITORY OSSEOINTEGRATED DEVICE ABUTMENT, ANY LENGTH, REPLACEMENT ONLY		No Rental	Y / \$1,336.90	5 YEARS	Not In Rate	25	20120901	22, 23, 24
L8699	PROSTHETIC IMPLANT, NOT OTHERWISE SPECIFIED (BONE-ANCHORED HEARING DEVICES ONLY)		No Rental	Y / Priced on PA	5 YEARS	Not In Rate	03, 04, 05, 17, 24, 25, 53, 57, 77, 78, 79	20080701	22, 23, 24
S1040	CRANIAL REMOLDING ORTHOSIS, PEDIATRIC, RIGID, WITH SOFT INTERFACE MATERIAL, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT(S)		No Rental	Y / \$2,331.08	1 PER LIFETIME	Not In Rate	53	20080701	11